

Institute of Minerals and Materials Technology

(Formerly Known as Regional Research Laboratory)

(Council of Scientific and Industrial Research)

BHUBANESWAR-751 013

FORM 3

[See Rule 19]

MEDICAL CERTIFICATE FOR GAZETTED OFFICERS RECOMMENDED LEAVE OR EXTENSION OF LEAVE OR COMMUTATION OF LEAVE

Signature of the Government servant

I _____ after careful personal examination of the case hereby certify that Shri/Shrimati/Kumari _____ whose signature is given above is suffering from _____ and I consider that a period of absence from duty of _____ with effect from _____ is absolutely necessary for the restoration of his/her health.

Civil Surgeon Staff Surgeon/
Authorized Medical Attendant
_____ Dispensary

Dated _____

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FORM-5

[See Rule-24(3)]

MEDICAL CERTIFICATE OF FITNESS TO RETURN TO DUTY

Signature of the Government Servant : _____

I _____ do hereby certificate that I have carefully examined Dr. / Shri/ Smt/ Kumari _____ whose signature is given above and found that he/she recovered from his/her illness and is now fit to resume duties in Government service. I also certify that before arriving at this decision, I have examined the original medical certificate(s) and statement(s) of the case (or certified copies there of) on which leave was granted or extended and have taken these in to consideration in arriving at my decision.

Civil Surgeon/Staff Surgeon/
Authorized Medical Attendant